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United States Bankruptcy Court Northern District of Ohio, Toledo Division

IN RE:		Case No
Grant, Tameeka L.		Chapter 7
	Debtor(s)	
	VERIFICATION OF CREDITOR	MATRIX
The above named debtor(s) here	by verify(ies) that the attached matrix listing	creditors is true to the best of my(our) knowledge.
Date: January 31, 2020	Signature: /s/ Tameeka Grant	
	Tameeka Grant	Debtor
Date:	Signature:	
		Joint Debtor, if any

Bgsu 407 Administration Bowling Green, OH 43402

Buckeye Broadband-Erie 409 E Market St Sandusky, OH 44870-2814

Choice Laboratory Service Inc. PO Box 674131 Dallas, TX 75267-4131

Cleveland Clinic 9500 Euclid Ave # RK2-4 Cleveland, OH 44195-0001

Columbia Gas PO Box 4629 Carol Stream, IL 60197-4629

Credit Protection Asso 1 Galleria Tower Dallas, TX 75201

Creditone Bank
PO Box 60500
City of Industry, CA 91716-0500

Discover Fin Svcs LLC PO Box 15316 Wilmington, DE 19850-5316

Distressed Asset Portfolio III, LLC c/o David A. Bader PO Box 42348 Cincinnati, OH 45242-0348

ERC
PO Box 23870
Jacksonville, FL 32241-3870

Ere Cmty Fcu 3311 Tiffin Ave Sandusky, OH 44870-9752

Erie County Health Department 420 Superior St Sandusky, OH 44870-1849

Fingerhut 6250 Ridgewood Rd Saint Cloud, MN 56303-0820

FinWise Bank c/o RISE PO Box 101808 Fort Worth, TX 76185-1808

Firelands Regional Medical Center 1111 Hayes Ave Sandusky, OH 44870-3323

Kohls/capone PO Box 3115 Milwaukee, WI 53201-3115

L.T.D. Financial Servics L.P. 3200 Wilcrest Dr Ste 600 Houston, TX 77042-6000

Midland Credit Management PO Box 301030 Los Angeles, CA 90030-1030

Midland Credit Management PO Box 2121 Warren, MI 48090-2121

Montgomery Lynch & Ass., Inc PO Box 22720 Beachwood, OH 44122-0720

National Credit Adjusters PO Box 3023-327 Hutchinson, KS 67501-3023 Northshore Healthcare PO Box 258896 Oklahoma City, OK 73125-8896

Ohio Edison PO Box 3687 Akron, OH 44309-3687

PNC Bank 2730 Liberty Ave Pittsburgh, PA 15222-4704

Portfolio Recovery Associates, LLC PO Box 12914 Norfolk, VA 23541-0914

Precision Radiology Inc. PO Box 74289 Cleveland, OH 44194-0002

Progressive Leasing 256 W Data Dr Draper, UT 84020-2315

Receivables Outsourcing, LLC PO Box 62850 Baltimore, MD 21264-2850

Syncb/Bp C/o PO Box 965024 Orlando, FL 32896-5024

Td Bank USA/Targetcred PO Box 673 Minneapolis, MN 55440-0673

Ted M. Traut 965 Keynote Cir Brooklyn Heights, OH 44131-1829

US Dept of Ed/Glelsi 2401 International Ln Madison, WI 53704-3121

Fill in this	s information to identi	y vour case:		
Debtor 1	Tameeka L. Gran			
DODIO! !	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
	kruptcy Court for the:	NORTHERN DIS	TRICT OF OHIO, TOLEDO DIVISION	
	1, 1, 2		,	
Case number				☐ Check if this is an
				amended filing
Official For				
Statemen	t of Intentio	n for Indiv	viduals Filing Under Chapte	er 7 12/15
If you are an indiv	idual filing under chap	nter 7. vou must fill	out this form if:	
	claims secured by you			
	d personal property a			
	er is earlier, unless the		you file your bankruptcy petition or by the date set for time for cause. You must also send copies to the cr	
	ple are filing together the form.	in a joint case, bot	h are equally responsible for supplying correct infor	mation. Both debtors must sign
	d accurate as possible ur name and case num		needed, attach a separate sheet to this form. On the	top of any additional pages,
Part 1: List You	ur Creditors Who Have	Secured Claims		
1. For any creditor	s that you listed in Pa		Creditors Who Have Claims Secured by Property (C	official Form 106D), fill in the
information belo	ow. ditor and the property th	nat is collateral	What do you intend to do with the property that	Did you claim the property
			secures a debt?	as exempt on Schedule C?
			_	_
Creditor's PN name:	IC Bank		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of	004016-0-1		Retain the property and enter into a <i>Reaffirmation</i>	Yes
property	2016 Kia Cadenza		Agreement. ☐ Retain the property and [explain]:	
securing debt:			— Retail the property and [explain].	_
Dort 2: Higt Vo	u Unavaired Derseyel	Dramarty Lagge		
	ur Unexpired Personal personal property lea		n Schedule G: Executory Contracts and Unexpired L	eases (Official Form 106G), fill in
			ired leases are leases that are still in effect; the lease ustee does not assume it. 11 U.S.C. § 365(p)(2).	e period has not yet ended. You
Describe your un	expired personal prop	erty leases		Will the lease be assumed?
Lessor's name:	Progressive L	easing		■ No
				☐ Yes
Description of lease	ed Lease of had	and fireplace fro	m Ria Lots	
Property:	Lease of Ded a	and ineplace IfO	iii big cots	
Part 3: Sign Be	elow			
Official Form 108		Statement of In	tention for Individuals Filing Under Chapter 7	page 1

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Deb	tor 1 Grant, Tameeka L.	Case number (if known)
	er penalty of perjury, I declare that I have indicated nerty that is subject to an unexpired lease.	ny intention about any property of my estate that secures a debt and any personal
Х	/s/ Tameeka Grant	X
	Tameeka L. Grant	Signature of Debtor 2
	Signature of Debtor 1	
	Date January 31, 2020	Date

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO, TOLEDO DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every

Par	t 1: Identify Yourself					
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name					
	Write the name that is on your government-issued picture identification (for example, your driver's	Tameeka First name		First name		
	license or passport).	Middle name	_	Middle name		
	Bring your picture identification to your meeting with the trustee.	g Grant Last name and Suffix (Sr., Jr., II, III)	-	Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years					
	Include your married or maiden names.					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6166				

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
		■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	1014 W Washington St	If Debtor 2 lives at a different address:		
		Sandusky, OH 44870-2207 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Erie	County		
		County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Del	otor 1 Grant, Tameeka L					Case number (if known)		
Par	t 2: Tell the Court About Y	′our Bank	ruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are				ach, see <i>Notice Required by 1</i> d check the appropriate box.	1 U.S.C. § 342(b) for Individuals Filing for Bankı	ruptcy (Form	
	choosing to file under	■ Chap	ter 7					
		□ Chap						
		☐ Chap						
		☐ Chap						
8.	How you will pay the fee					with the clerk's office in your local court for more self, you may pay with cash, cashier's check, or		
		If y		orney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a				
		□ In	eed to pay			n, sign and attach the Application for Individuals	to Pay The	
		l re	equest that t required tur family si	at my fee be waived to, waive your fee, ar ze and you are unab	d (You may request this option nd may do so only if your incom	only if you are filing for Chapter 7. By law, a judge is less than 150% of the official poverty line the strong choose this option, you must fill out the and file it with your petition.	nat applies to	
9.	Have you filed for	■ No.						
	bankruptcy within the last 8 years?	☐ Yes.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases	■ No						
	pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor	-		Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District	-	When	Case number, if known		
11.	Do you rent your	□ No.	Go to	line 12.				
	residence?	Yes.	Has yo	our landlord obtaine	ed an eviction judgment agains	t you?		
				No. Go to line 12.				
				Yes. Fill out <i>Initial</i> bankruptcy petition		udgment Against You (Form 101A) and file it w	ith this	

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)eb	tor 1 Grant, Tameeka L	•			Case number (if known)	
art	3: Report About Any Bus	sinesses \	You Own	as a Sole Proprieto	or	
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	e and location of bus	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numl	oer, Street, City, Sta	te & ZIP Code	
	to this petition.		Chec	k the appropriate bo	x to describe your business:	
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))	
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))	
				None of the above		
If you are filing under Chapter 11, the court must know whether you are a small business debtor s Chapter 11 of the Bankruptcy Code and are you a small business If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recent be operations, cash-flow statement, and federal income tax return or if any of these documents do not U.S.C. 1116(1)(B).				small business debtor, you must attach your most recent balance sheet, statement of		
	debtor? For a definition of small	■ No.	I am	not filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.		
		☐ Yes.	I am	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
	D			D	Provide That Man Is Investigate Assertion	
art	•		Hazardo	us Property or Any	/ Property That Needs Immediate Attention	
4.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable	■ No. □ Yes.	What is	the hazard?		
	hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?		
	- ,				Number, Street, City, State & Zip Code	
		-				

Debtor 1 Grant, Tameeka L. Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit
counseling agency within the 180 days before I filed
this bankruptcy petition, and I received a certificate of
completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

tor 1 Grant, Tameeka L	•			Case number (if known)			
6: Answer These Question	ons for Rep	orting Purposes					
What kind of debts do you have?					U.S.C.§ 101(8) as "incurred by an		
	!	☐ No. Go to line 16b.					
	I	Yes. Go to line 17.					
		Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
	I	☐ No. Go to line 16c.					
	I	☐ Yes. Go to line 17.					
	16c.	State the type of debts you owe	that are not consumer debts	or business debts			
Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7	. Go to line 18.				
Do you estimate that after any exempt property is excluded and					uded and administrative expenses are		
administrative expenses	I	No					
are paid that funds will be available for distribution to unsecured creditors?	I	□Yes					
How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000		l 25,001-50,000		
	□ 50-99		<u> </u>		50,001-100,000		
			☐ 10,001-25,000		l More than100,000		
	\$ 0 - \$50	0,000	□ \$1,000,001 - \$10 mi	illion	l \$500,000,001 - \$1 billion		
be worth?					1 \$1,000,000,001 - \$10 billion		
					l \$10,000,000,001 - \$50 billion l More than \$50 billion		
	□ \$0 - \$50),000			\$500,000,001 - \$1 billion		
be?					\$1,000,000,001 - \$10 billion \$1,000,000,001 - \$50 billion		
	☐ \$100,001 - \$500,000 ☐ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million		1 More than \$50 billion		
7: Sign Below							
you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
				who is not an attorney	y to help me fill out this document, I		
	I request re	elief in accordance with the ch	apter of title 11, United State	s Code, specified in t	this petition.		
	case can re	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
			Signat	ture of Debtor 2			
	Executed of	January 31, 2020 MM / DD / YYYY	Execu	ted on MM / DD / Y	YYYY		
	Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? How many Creditors do you estimate that you owe? How much do you estimate your assets to be worth?	What kind of debts do you have? 16a.	What kind of debts do you have? 16a. Are your debts primarily con individual primarily for a person individual primarily business or individual primarily business or investment or paid business or investment or individual primarily business or investment or individual primari	Are you filling under Chapter 7. By the type of debts you own that after any exampt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? How much do you estimate that that you owe? How much do you estimate that you owe? How much do you estimate that the sew of the worth? How much do you estimate that the sew of the worth? How much do you estimate that the sew of the worth? How much do you estimate that the sew of the worth? How much do you estimate that the sew of the worth? How much do you estimate that the sew of the worth? How much do you estimate that the sew of the worth? How much do you estimate that the sew of the worth? How much do you estimate that the sew of the worth? How much do you estimate that the sew of the worth? How much do you estimate that you owe? How much do you estimate that you owe? How much do you estimate that the sew of the worth? How much do you estimate that you owe? How much do you estimate your liabilities to be worth? For you be worth? How much do you estimate your liabilities to be you go you how you liabilities to be you go you how you liabilities to be you go you you how you liabilities to you you you you you you you you you yo	Answer These Questions for Reporting Purposes		

Official Form 101

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Debtor 1	Grant, Tameeka L.	Case number (if known)		

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Shelly L. Kennedy	Date	January 31, 2020
Signature of Attorney for Debtor		MM / DD / YYYY
Shelly L. Kennedy		
Printed name		
Law Offices of Shelly L. Kennedy		
Firm name		
330 E Madison St		
Sandusky, OH 44870-3604		
Number, Street, City, State & ZIP Code		
Contact phone (419) 626-6300	Email address	shelly@kennedydivorcelaw.com
0043523		
Bar number & State		

Fill in this	information to identi	ify your cas	e and this filing:				
Debtor 1	Tameeka L. Grar	nt					
	First Name		le Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middl	e Name	Last Name			
United States Bank	ruptcy Court for the:	NORTHER	RN DISTRICT OF (OHIO, TOLEDO DIVISION			
	. ,					_	0
Case number							Check if this is an amended filing
Official Forr	m 106A/B						
Schedule	A/B: Prop	erty					12/15
think it fits best. Be a	as complete and accura space is needed, attach	ate as possibl	e. If two married peo	If an asset fits in more than or ople are filing together, both ar the top of any additional page	e equally responsible for	supplyi	ng correct
Part 1: Describe Ea	nch Residence, Building	g, Land, or Ot	her Real Estate You	Own or Have an Interest In			
1. Do you own or hav	ve any legal or equitable	e interest in a	nny residence, buildi	ing, land, or similar property?			
■ No. Go to Part 2							
☐ Yes. Where is the							
Part 2: Describe Yo	our Vehicles						
□ No ■ Yes	ks, tractors, sport ut				Do not deduct secure	ed claims	or exemptions. Put
	adenza		Debtor 1 only	n the property? Check one	the amount of any se Creditors Who Have	cured cla	ims on Schedule D:
	016		Debtor 2 only		Current value of the	_	urrent value of the
Approximate n			Debtor 1 and Debto At least one of the o	•	entire property?	po	ortion you own?
2016 Kia C	adenza, good				\$12,580.0	^	\$12,580.00
	51,000 miles; valu d by kbb.com	ue L	Check if this is con (see instructions)	mmunity property	φ12,300.0		\$12,300.00
(Private pa		oan					
encumber	Ca by I' NO Ballk II	vari					
Examples: Boats,				chicles, other vehicles, and a chowmobiles, motorcycle acce			
■ No □ Yes							
ப 165							
					Г		
				from Part 2, including any			\$12,580.00
			,				
	our Personal and Hous		tin and till to	and a star - O		_	
Do you own or have	ve any legal or equita	able interes	t in any of the folk	owing items?		port	ent value of the ion you own?

claims or exemptions.

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Deb	otor 1	Grant, Tame	eka L.	Case number (if known)
	<i>Example</i> ⊐ No −	old goods and fues: Major appliance	urnishings ces, furniture, linens, china, kitchenware		
	_ 100.	D0001100	Normal, ordinary and used household goods & fu one item exceeds \$625.00	ırnishings; no	\$1,500.00
	□No	s: Televisions an	nd radios; audio, video, stereo, and digital equipment; computers, phones, cameras, media players, games		
		les of value	4 televisions; son's gaming system; computer; co		\$1,000.00
ı	No		figurines; paintings, prints, or other artwork; books, pictures, or o nemorabilia, collectibles	ther art objects, stamp, com, c	n basebali card collections, other
	Example ■ No	ent for sports and es: Sports, photogoinstruments Describe	nd hobbies graphic, exercise, and other hobby equipment; bicycles, pool table	es, golf clubs, skis; canoes an	d kayaks; carpentry tools; musical
10.	Firearm Example ■ No	ıs	s, shotguns, ammunition, and related equipment		
	□ No	les: Everyday clo	thes, furs, leather coats, designer wear, shoes, accessories		
	Yes.	Describe	Normal, ordinary and used women's clothing		\$100.00
[□ No É		velry, costume jewelry, engagement rings, wedding rings, heirloor	m jewelry, watches, gems, gol	d, silver
			Fitbit watch		\$70.00
	<i>Examp</i> i ⊒ No	m animals les: Dogs, cats, b	pirds, horses		
	– 165.	Describe	Bischon dog		\$200.00
	No	ner personal and	d household items you did not already list, including any he	ealth aids you did not list	
	Add th	ne dollar value d	of all of your entries from Part 3, including any entries for p	ages you have attached for	\$2,870.00
Part	t 4: Des	scribe Your Financ	cial Assets		

De	btor 1 Grant, Ta	ımeeka L.		Case number (if known)	
Do	you own or have ar	ny legal or equitable interest in any	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No	ou have in your wallet, in your home, in	,	nen you file your petition	
	– 165			Cash on hand	\$0.00
		g, savings, or other financial accounts; ns. If you have multiple accounts witl		edit unions, brokerage houses	s, and other similar
	Yes		Institution name:		
		17.1. Checking Accoun	Civista Bank, Account en	ding **** - 2572	\$1.00
		ls, or publicly traded stocks ids, investment accounts with brokera	ge firms, money market accounts		
	□ Yes	Institution or issuer nam	ne:		
	Non-publicly traded joint venture ■ No	I stock and interests in incorporate	d and unincorporated businesse	s, including an interest in a	n LLC, partnership, and
		c information about them Name of entity:		% of ownership:	
	Negotiable instrume Non-negotiable instr	orporate bonds and other negotiable ints include personal checks, cashiers in ruments are those you cannot transfer	' checks, promissory notes, and mor	ney orders.	
	■ No □ Yes. Give specific	information about them Issuer name:			
	Retirement or pens Examples: Interests No	ion accounts in IRA, ERISA, Keogh, 401(k), 403(b	o), thrift savings accounts, or other	pension or profit-sharing plar	ns
	Yes. List each acc	ount separately. Type of account: 401(k) or Similar Plan	Institution name: Ventra Sandusky Union #	1216 401(K) Plan	\$6,979.45
		nd prepayments used deposits you have made so that yents with landlords, prepaid rent, public			others
	■ Yes		Institution name or individual:		
		Security Deposit on Rental Unit	Security deposit for Debte Gerold Schlett	or's residence; Mr.	\$450.00
	Annuities (A contract ■ No	ct for a periodic payment of money to y	ou, either for life or for a number of y	years)	
	□ Yes	Issuer name and description.			
		ation IRA, in an account in a qualifi 1), 529A(b), and 529(b)(1).	ed ABLE program, or under a qu	alified state tuition progran	n.
	Yes	Institution name and description. Se	parately file the records of any intere	ests.11 U.S.C. § 521(c):	

D	ebtor 1	Grant, Tameeka L.			ase number (if known)	
25	■ No		property (other than anything list	ed in line 1), and ri	ghts or powers exercisa	able for your benefit
	☐ Yes.	Give specific information about the	em			
26	Examp ■ No	oles: Internet domain names, websi	secrets, and other intellectual protes, proceeds from royalties and lice			
	⊔ Yes.	Give specific information about the	em			
27	Examp ■ No		enses, cooperative association holdin	ngs, liquor licenses, p	professional licenses	
	☐ res.	Give specific information about the	em			
M	oney or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28	Tay ref	unds owed to you				
20	□ No	unus oweu to you				
	Yes.	Give specific information about the	m, including whether you already file	d the returns and the	e tax years	
		·			•	
				_		****
			Anticipated 2019 Tax Refun	ıd	Federal	\$950.00
	Other a Examp ■ No □ Yes. Interest	unpaid loans you made to so Give specific information ts in insurance policies	ance payments, disability benefits, si meone else nce; health savings account (HSA);			, Social Security benefits;
	■ No					
	☐ Yes. I	Name the insurance company of ea Company n		Beneficiary	:	Surrender or refund value:
32	If you a died. No	erest in property that is due you are the beneficiary of a living trust, or Give specific information	I from someone who has died expect proceeds from a life insurance	e policy, or are curre	ntly entitled to receive pro	perty because someone has
33			r not you have filed a lawsuit or n tes, insurance claims, or rights to s		payment	
	☐ Yes.	Describe each claim				
34	. Other c	ontingent and unliquidated clain	ms of every nature, including cou	interclaims of the c	lebtor and rights to set	off claims
	☐ Yes.	Describe each claim				
35	. Any fin	ancial assets you did not alread	y list			
		Give specific information				

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page 4

Schedule A/B: Property

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Official Form 106A/B

Deb	otor 1 Grant, Tameeka	<u>L.</u>		Case number (if known)	
36.		of your entries from Part 4, includin nere		s you have attached for	\$8,380.45
Part	5: Describe Any Business-Re	elated Property You Own or Have an Inte	rest In. List any real estat	e in Part 1.	
37. D	Do you own or have any legal or	equitable interest in any business-relat	ed property?		
	No. Go to Part 6.				
	Yes. Go to line 38.				
Part		ommercial Fishing-Related Property Yoເ st in farmland, list it in Part 1.	u Own or Have an Interest	ln.	
46. [_'	al or equitable interest in any farm-	or commercial fishing-	-related property?	
	No. Go to Part 7.				
	Yes. Go to line 47.				
Part	7: Describe All Property	You Own or Have an Interest in That Yo	u Did Not List Above		
F2 [De vou bave ether preparty	of any kind you did not already list	2		_
53. I	Examples: Season tickets, co	of any kind you did not already list	f		
	■ No	,,			
	Yes. Give specific information	on			
54.	Add the dollar value of all	of your entries from Part 7. Write the	at number here		\$0.00
Part	8: List the Totals of Each	Part of this Form			
55.	Part 1: Total real estate, li	ne 2			\$0.00
	Part 2: Total vehicles, line		\$12,580.00	-	Ψ0.00
	Part 3: Total personal and		\$2,870.00		
	Part 4: Total financial asse		\$8,380.45		
	Part 5: Total business-rela	•	\$0.00		
		ing-related property, line 52	\$0.00		
61.		• • • • • • • • • • • • • • • • • • • •	+ \$0.00		
62.	Total personal property. A	dd lines 56 through 61	\$23,830.45	Copy personal property total	\$23,830.45
63.	Total of all property on Sc	hedule A/B. Add line 55 + line 62			\$23,830.45

Fill in th	nis information to identif	y your case:		
Debtor 1	Tameeka L. Gran	it		
	First Name	Middle Name	Last Name	}
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO, TOLEDO DIVISION	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	orm 106C			
Schedul	e C: The Pro	operty You C	laim as Exempt	4/19
Be as complete a	nd accurate as possible. I	f two married people are filin	og together, both are equally responsible for s	upplying correct information. Using the

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	■ You are claiming state and federal nonbankr	uptcy exemptions. 11 l	U.S.C	. § 522(b)(3)					
	☐ You are claiming federal exemptions. 11 U.	S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.					
	Kia	\$12,580.00			R.C. § 2329.66(A)(2)				
	Cadenza 2016 51000 Line from Schedule A/B: 3.1		-	100% of fair market value, up to any applicable statutory limit					
	Normal, ordinary and used	\$1,500.00			R.C. § 2329.66(A)(4)(a)				
	household goods & furnishings; no one item exceeds \$625.00 Line from <i>Schedule A/B</i> : 6.1		•	100% of fair market value, up to any applicable statutory limit					
	4 televisions; son's gaming system;	\$1,000.00			R.C. § 2329.66(A)(4)(a)				
	computer; cell phone Line from Schedule A/B. 7.1			100% of fair market value, up to any applicable statutory limit					
	Normal, ordinary and used women's	\$100.00			R.C. § 2329.66(A)(4)(a)				
	clothing Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit					
	Fitbit watch	\$70.00			R.C. § 2329.66(A)(4)(b)				
	Line from Schedule A/B. 12.1			100% of fair market value up to					

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Part 1: Identify the Property You Claim as Exempt

any applicable statutory limit

	Brief description of the property and line on	Current value of the	Δma	ount of the exemption you claim	Specific laws that allow exemption	
	Schedule A/B that lists this property	portion you own	7 (111)	sunt of the exemption you diam.	opositio lawe that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	Bischon dog Line from Schedule A/B 13.1	\$200.00			R.C. § 2329.66(A)(18)	
	Enternolli Governol V.D. 1011			100% of fair market value, up to any applicable statutory limit		
	Civista Bank, Account ending **** - 2572	\$1.00			R.C. § 2329.66(A)(3)	
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
	Ventra Sandusky Union #1216 401(K) Plan	\$6,979.45			R.C. § 2329.66(A)(10)(a)	
	Line from Schedule A/B. 21.1			100% of fair market value, up to any applicable statutory limit		
	Security deposit for Debtor's residence; Mr. Gerold Schlett	\$450.00			R.C. § 2329.66(A)(3)	
	Line from Schedule A/B. 22.1			100% of fair market value, up to any applicable statutory limit		
	Anticipated 2019 Tax Refund Line from Schedule A/B: 28.1	\$950.00			R.C. § 2329.66(A)(18)	
	Line from Schedule A/B. 20.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 y ■ No			on or after the date of adjustment.)		
	Yes. Did you acquire the property covered	by the exemption within	1,21	5 days before you filed this case?		
	□ No					
	☐ Yes					

Official Form 106C

Fill in this	information to iden	tify your case:				
Debtor 1	Tameeka L. Gra					
	First Name	Middle Name Last Nar	ne			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Nar	20			
United States Bank	cruptcy Court for the:	NORTHERN DISTRICT OF OHIO, TOL	EDO DI\	/ISION		
Case number						
(if known)					☐ Check	if this is an
					ameno	led filing
Official Form	106D					
		Who Have Claims Secu	rad k	ov Droporty	,	40/45
Schedule L	J. Creditors	Who Have Claims Secu	rea i	by Property	/	12/15
		If two married people are filing together, both a t, number the entries, and attach it to this form.				
•	ave claims secured by	/ your property?				
		is form to the court with your other schedules.	You hav	e nothing else to rep	ort on this form.	
_	II of the information b	•		o nouning olde to rep		
		elow.				
	Secured Claims			Column A	Column B	Column C
		nore than one secured claim, list the creditor separ a particular claim, list the other creditors in Part 2.		Amount of claim	Value of collateral	Unsecured
		cal order according to the creditor 's name.		Do not deduct the	that supports this	portion
2.1 PNC Bank		Describe the property that secures the claim:		value of collateral. \$15,637.00	\$12,580.00	If any \$3,057.00
Creditor's Name		2016 Kia Cadenza		<u> </u>		
		2016 Kia Cadenza, good condition				
		51,000 miles; value determined by kbb.com (Private party sale);				
0700111		encumbered by PNC Bank loan				
2730 Libert Pittsburgh,		As of the date you file, the claim is: Check all the	at			
15222-4704		apply. ☐ Contingent				
Number, Street, C	City, State & Zip Code	☐ Unliquidated				
		Disputed				
Who owes the debi	t? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mortgage car loan)	or secure	d		
Debtor 2 only		_				
☐ Debtor 1 and Deb☐ At least one of the	•	☐ Statutory lien (such as tax lien, mechanic's lied) ☐ Judgment lien from a lawsuit	en)			
☐ Check if this clai		Other (including a right to offset)				
community debt						-
Date debt was incur	red 2017-06	Last 4 digits of account number 72	297			
Add the dollar value	of your entries in Col	umn A on this page. Write that number here:		\$15,637.	00	
If this is the last pag Write that number he		e dollar value totals from all pages.		\$15,637.	00	
Part 2: List Othe	ers to Be Notified fo	r a Debt That You Already Listed				

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

Fill	in this info	rmation to identify you	r case:			,		
Debto	r 1	Tameeka L. Grant						
Debto	r 0	First Name	Middle Nan	ne	Last Name			
	if, filing)	First Name	Middle Nan	ne	Last Name			
United	d States Ban	kruptcy Court for the:	NORTHERN	DISTRICT OF OHIC	O, TOLEDO	DIVISION		
Case	number							
(if know								Check if this is an
							a	mended filing
Offic	ial Form	106F/F						
		F: Creditors W	ho Have I	Insecured C	laims			12/15
D: Cred the Con case nu	litors Who Ha ntinuation Paç ımber (if knov	ve Claims Secured by Proge to this page. If you have wn).	operty. If more spree no information	pace is needed, copy n to report in a Part, d	the Part yo	iny creditors with partially se u need, fill it out, number the at Part. On the top of any add	entries in the	boxes on the left. Attach
Part 1		of Your PRIORITY Unservices have priority unsecured						
_	No. Go to Pa		ciaiiiis agairist	you:				
_	No. Go to Fa Yes.	11 2.						
ш	res.							
Part 2	List All	of Your NONPRIORITY	/ Unsecured C	laims				
3. Do	any creditor	s have nonpriority unsec	ured claims agai	nst you?				
	No. You have	e nothing to report in this pa	art. Submit this for	m to the court with you	ur other sche	dules.		
	Yes.							
un	secured claim	, list the creditor separately	for each claim. F	or each claim listed, id	entify what ty	holds each claim. If a creditor ope of claim it is. Do not list clain three nonpriority unsecured clai	ms already inc	luded in Part 1. If more
								Total claim
4.1	Bgsu		L	ast 4 digits of accou	nt number	4AD9		\$526.00
	Nonpriority	Creditor's Name		Vhen was the debt in	curred?	2014-08-25		
	407 Adm	ninistration	•	viien was the debt in	curreur	2014-00-25		-
		Green, OH 43402						
		eet City State Zip Code red the debt? Check one.	A	As of the date you file	e, the claim i	s: Check all that apply		
	Debtor 1		г	70				
	Debtor 2	•		☐ Contingent☐ Unliquidated				
	_	I and Debtor 2 only		☐ Disputed				
		one of the debtors and and		ype of NONPRIORIT	Y unsecured	I claim:		
	_	f this claim is for a comn	-	Student loans				
	debt					ration agreement or divorce tha	t you did not	
	_	n subject to offset?		eport as priority claims				
	■ No			•	-	g plans, and other similar debts		
				Other Cresity In	stallment	account		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 10

Debt	Or 1 Grant, Tameeka L.	Case number (f known)	
4.2	Buckeye Broadband-Erie Nonpriority Creditor's Name	Last 4 digits of account number 9885	\$706.00
		When was the debt incurred? 2018-04	
	409 E Market St Sandusky, OH 44870-2814 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Open account	
4.3	Choice Laboratory Service Inc.	Last 4 digits of account number 4072	\$110.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 674131 Dallas, TX 75267-4131		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
		— Ottor. Opedity	
4.4	Cleveland Clinic	Last 4 digits of account number 6086	\$274.40
	Nonpriority Creditor's Name	When was the debt incurred?	
	9500 Euclid Ave # RK2-4 Cleveland, OH 44195-0001		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	_	
	□ res	Other. Specify	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 10

\$269.51
ou did not
\$525.14
ou did not
\$2,985.00
ou did not

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 10

Debto	or 1 Grant, Tameeka L.		Case number (f known)	
4.8	Distressed Asset Portfolio III, LLC Nonpriority Creditor's Name c/o David A. Bader	Last 4 digits of account number When was the debt incurred?	2689	\$1,338.44
	PO Box 42348 Cincinnati, OH 45242-0348 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.9	Ere Cmty Fcu	Last 4 digits of account number	2972	\$1,900.00
	Nonpriority Creditor's Name	When was the debt incurred?	2018-06-19	
	3311 Tiffin Ave	When was the dest mounted.	2010-00-19	
	Sandusky, OH 44870-9752			
	Number Street City State Zip Code	As of the date you file, the claim		
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	Lateta	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt	_		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other Specify Installment	t account	
4.10	Erie County Health Department	Last 4 digits of account number	RATA	\$443.87
	Nonpriority Creditor's Name			<u> </u>
	420 Comparing 64	When was the debt incurred?		
	420 Superior St Sandusky, OH 44870-1849			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	malana and others (1.9 - 1.1)	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 10

Debto	Grant, Tameeka L.	Case number (f known)	
4.11	Fingerhut Nonpriority Creditor's Name	Last 4 digits of account number 9752	\$329.12
		When was the debt incurred?	
	6250 Ridgewood Rd Saint Cloud, MN 56303-0820 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.12	FinWise Bank c/o RISE Nonpriority Creditor's Name	Last 4 digits of account number 5470	\$3,722.54
	Nonpholity Greator's Name	When was the debt incurred?	
	PO Box 101808		
	Fort Worth, TX 76185-1808 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Offeck all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.13	Firelands Regional Medical Center	Last 4 digits of account number 952H	\$940.86
	Nonpriority Creditor's Name	When was the debt incurred?	
	1111 Hayes Ave Sandusky, OH 44870-3323		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	ls the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

Debto	Grant, Tameeka L.	Case number (f known)		
4.14	Kohls/capone Nonpriority Creditor's Name	Last 4 digits of account number	\$1,576.00	
	Nonpholity Creditor's Name	When was the debt incurred? 2014-09		
	PO Box 3115 Milwaukee, WI 53201-3115 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divor	ce that you did not	
	Is the claim subject to offset?	report as priority claims	•	
	No	☐ Debts to pension or profit-sharing plans, and other similar	debts	
	Yes	Other. Specify Revolving account		
4.15	L.T.D. Financial Servics L.P. Nonpriority Creditor's Name	Last 4 digits of account number 5951	\$1,338.44	
	Nonpholity Creditor's Name	When was the debt incurred?		
	3200 Wilcrest Dr Ste 600 Houston, TX 77042-6000			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only □ Contingent			
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divor- report as priority claims	ce that you did not	
	■ No	\square Debts to pension or profit-sharing plans, and other similar	debts	
	☐Yes	Other. Specify		
4.16	Midland Credit Management	Last 4 digits of account number 6627	\$1,847.69	
	Nonpriority Creditor's Name		<u> </u>	
	PO Box 301030	When was the debt incurred?		
	Los Angeles, CA 90030-1030			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans	and the transmitted and	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divor report as priority claims	ce mai you did not	
	■ No	Debts to pension or profit-sharing plans, and other similar	debts	
	☐ Yes	Other. Specify		

		-
Midland Credit Management Nonpriority Creditor's Name	Last 4 digits of account number 6044	\$6,593.4
Nonphority Creditor's Name	When was the debt incurred?	
PO Box 2121		
Warren, MI 48090-2121 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	To of the date year me, the stant to. Oncor an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	
Northshore Healthcare	Last 4 digits of account number 9184	\$180.00
Nonpriority Creditor's Name	When we the debt in some 10	·
PO Box 258896	When was the debt incurred?	
Oklahoma City, OK 73125-8896		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	
Ohio Edison		£42C 00
Ohio Edison Nonpriority Creditor's Name	Last 4 digits of account number 4510	\$126.09
	When was the debt incurred?	
PO Box 3687		
Akron, OH 44309-3687 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam is. Oncok an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debto	^{r 1} Grant, Tameeka L.		Case number (f known)			
4.20	Precision Radiology Inc. Nonpriority Creditor's Name	Last 4 digits of account number	0169	\$35.52		
	PO Box 74289 Cleveland, OH 44194-0002	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify				
4.21	Syncb/Bp	Last 4 digits of account number	7104	\$744.00		
	Nonpriority Creditor's Name C/o PO Box 965024	When was the debt incurred?	2016-12			
	Orlando, FL 32896-5024	_				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	Пол				
	Debtor 2 only	☐ Contingent☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt		aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing				
	☐ Yes	Other. Specify Revolving	account			
4.22	Td Bank USA/Targetcred	Last 4 digits of account number	5316	\$4,896.00		
	Nonpriority Creditor's Name	When was the debt incurred?	2007-09			
	PO Box 673					
	Minneapolis, MN 55440-0673 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	7.0 0 , ,	or oncor an mar appry			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	another Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts			
	☐ Yes	■ Other. Specify Revolving	•			
	□ 162	Other. Specify Revolving	account			

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor	1 Grant, Tameeka L.		Case number (if known)						
4.23	US Dept of Ed/Glelsi	Last 4 digits of account number	8581	\$30,588.00					
	Nonpriority Creditor's Name	When was the debt incurred?	2013-01						
	2401 International Ln Madison, WI 53704-3121	mich was the dost mounted.	2013-01						
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply						
	Who incurred the debt? Check one.								
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:						
	Check if this claim is for a community	Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separement as priority claims	aration agreement or divorce that you did not						
	No	Debts to pension or profit-shari	ng plans, and other similar debts						
	☐ Yes								
	La res	Other. Specify Installmen	it account						
4.24	US Dept of Ed/Glelsi	Last 4 digits of account number	8581	\$7,630.00					
	Nonpriority Creditor's Name	When was the debt incurred?	2015-08						
	2401 International Ln								
	Madison, WI 53704-3121								
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
	Debtor 1 only	Пол							
	_ ′	Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	nd claim:						
	☐ Check if this claim is for a community	Student loans	o ordini.						
	debt	_	aration agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims	aration agreement or averse that you did not						
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts						
	Yes	Other. Specify Installmen	t account						
Part 3:	List Others to Be Notified About a De	ht That You Already Listed							
5. Use th is tryi have i notifie	is page only if you have others to be notified ing to collect from you for a debt you owe to smore than one creditor for any of the debts the dofor any debts in Parts 1 or 2, do not fill out and Address	about your bankruptcy, for a debt that y omeone else, list the original creditor ir at you listed in Parts 1 or 2, list the addi or submit this page.	Parts 1 or 2, then list the collection agency I tional creditors here. If you do not have addit	nere. Similarly, if you					
	: Protection Asso	On which entry in Part 1 or Part 2 did you Line 4.2 of (<i>Check one</i>):	I list the original creditor? Part 1: Creditors with Priority Unsecured Clain	ns					
	eria Tower		Part 2: Creditors with Nonpriority Unsecured C	Claims					
Dallas	s, TX 75201	Last 4 digits of account number	9885						
Name a	nd Address	On which entry in Part 1 or Part 2 did you	u list the original creditor?						
ERC		Line 4.22 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Clain	ns					
_	ox 23870 onville, FL 32241-3870		Part 2: Creditors with Nonpriority Unsecured C	Claims					
Jacks	Oliville, FL 32241-3070	Last 4 digits of account number	5316						
Name a	nd Address	On which entry in Part 1 or Part 2 did you	ı list the original creditor?						
Montg	jomery Lynch & Ass., Inc	· _ · _ · _ · _ · _ · _ · _ · _ · _	☐ Part 1: Creditors with Priority Unsecured Clain	ns					
-	ox 22720	ı	Part 2: Creditors with Nonpriority Unsecured C	Claims					
Beacr	wood, OH 44122-0720	Last 4 digits of account number	9184						
Name a	nd Address	On which entry in Part 1 or Part 2 did you	ı list the original creditor?						

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Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1 Grant, Tameeka L.		Case number (f known)			
National Credit Adjusters PO Box 3023-327	Line 4.12 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims			
Hutchinson, KS 67501-3023	Last 4 digits of account number	5470			
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?			
Portfolio Recovery Associates, LLC	Line 4.21 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims			
PO Box 12914		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Norfolk, VA 23541-0914	Last 4 digits of account number	7104			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?				
Receivables Outsourcing, LLC	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
PO Box 62850 Baltimore, MD 21264-2850		Part 2: Creditors with Nonpriority Unsecured Claims			
Ballinore, MD 21204-2000	Last 4 digits of account number	6086			
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?			
Ted M. Traut	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
965 Keynote Cir Brooklyn Heights, OH 44131-1829		Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number	8506			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				-	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ ——	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6~	\$	0.00
		you did not report as priority claims	6g.	Ψ	0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$	0.00
	6h. 6i.		_	·	

Fill in th	Fill in this information to identify your case:				
Debtor 1	Tameeka L. Gran	ıt			
	First Name	Middle Name	Last Name	<u> </u>	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO, TOLEDO DIVISION		
Case number					
(if known)					Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Progressive Leasing
256 W Data Dr
Draper, UT 84020-2315

State what the contract or lease is for
Lease of bed and fireplace from Big Lots

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Fi	Il in this information to identi	fy your case:			
Debtor 1	Tameeka L. Gran	Middle Name	Loot Name		
Debtor 2	Filst Name	widdle Name	Last Name		
(Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO, TOLEDO DI	VISION	
Case num	ber				
(if known)					Check if this is an amended filing
Sched	I Form 106H Jule H: Your Cod are people or entities who a		s vou may haye. Be as	complete and accurate	12/15 e as possible. If two married people
are filing to and numbe	ogether, both are equally resp	oonsible for supplying co the left. Attach the Addit	orrect information. If mo	ore space is needed, co	opy the Additional Page, fill it out, ditional Pages, write your name and
1. Do	you have any codebtors? (If	you are filing a joint case, d	o not list either spouse as	a codebtor.	
■ No					
☐ Yes	5				
	hin the last 8 years, have you rnia, Idaho, Louisiana, Nevada				states and territories include Arizona,
`	. Go to line 3. s. Did your spouse, former spou	se, or legal equivalent live v	vith you at the time?		
line 2	again as a codebtor only if the Schedule E/F (Official Form	nat person is a guarantor	or cosigner. Make sure	you have listed the ci	with you. List the person shown in reditor on Schedule D (Official Form le E/F, or Schedule G to fill out
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				Schedule D, lin	e
	Name			☐ Schedule E/F, I	
_				☐ Schedule G, lin	e
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, lin	e
	Name			☐ Schedule E/F, I	line
	Number Street			_	
	City	State	ZIP Code		

Schedule H: Your Codebtors

Fill	in this information to identify your ca	ise:								
Del	otor 1 Tameeka L.	Grant								
1 -	otor 2 ouse, if filing)				_					
Uni	ted States Bankruptcy Court for the:	NORTHERN DISTRIC	T OF OHIO, TOLE	DO						
	se number nown)					☐ An a	if this is: amended upplemen ome as of	t showing	postpetition o	chapter 13
0	fficial Form 106I					MM	1 / DD/ YY	ΥΥ		
S	chedule I: Your Inco	ome								12/1
spo atta	plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. Count 1: Describe Employment information.	spouse is not filing with	n you, do not inclu	de informa	ation	about you	ur spouse er (if kno	e. If more wn). Ans	space is ne	eded,
	If you have more than one job,		■ Employed				☐ Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed				□ Not em			
	employers.	Occupation	Production Se	rvices						
	Include part-time, seasonal, or self-employed work.	Employer's name	Ventra Sandus	sky LLC						
	Occupation may include student o homemaker, if it applies.	r Employer's address	3020 Tiffin Ave Sandusky, OH		352					
		How long employed th	ere? <u>3 yea</u> ı	s and 8 r	non	ths				
Pai	t 2: Give Details About Mon	thly Income								
	mate monthly income as of the da ss you are separated.	te you file this form. If yo	ou have nothing to re	port for any	/ line	, write \$0 ir	n the spac	e. Include	your non-filir	ng spouse
	u or your non-filing spouse have more ce, attach a separate sheet to this for		ine the information f	or all emplo	oyers	for that pe	rson on th	e lines be	elow. If you ne	eed more
						For Debto	or 1		otor 2 or ng spouse	
2.	List monthly gross wages, salar deductions). If not paid monthly, ca			2.	\$	3,10	60.39	\$	N/A	
3.	Estimate and list monthly overti	me pay.		3.	+\$	2	40.40	+\$	N/A	
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$	3,400	.79	\$	N/A	

Official Form 106l Schedule I: Your Income page 2

13. Do you expect an increase or decrease within the year after you file this form?

No.

Yes. Explain:

Combined monthly income

Fill in	this information to ident	ify your case:					
Debto	or 1 Tampok	a L. Grant			Che	eck if this is:	
	Tameek	a L. Grant				An amended filing	
Debto							ing postpetition chapter 13
(Spou	ise, if filing)					expenses as of the	rollowing date:
United	d States Bankruptcy Court fo	or the: NORT	HERN DISTRICT OF OHIO ON	, TOLEDO		MM / DD / YYYY	
Case (If kno	number own)						
Off	icial Form 106	 SJ					
Sc	hedule J: You	ır Expei	nses				12/15
Be as infor (if kn	s complete and accurat mation. If more space i lown). Answer every qu	e as possible s needed, atta estion.	If two married people are ch another sheet to this for				
Part 1.	1: Describe Your He ls this a joint case?	ousehold					
	■ No. Go to line 2. □ Yes. Does Debtor 2	ive in a senar	ate household?				
	□ No	·	sial Form 106J-2,Expenses t	for Congrete Househ	old of Dobt	or 2	
	Tes. Debior 2	inust lile Onic	iai Fumi 1005-2,Expenses i	or separate nousen	ioldol Debl	OI 2.	
2.	Do you have dependen	ts? □ No					
	Do not list Debtor 1 and Debtor 2.	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.			Son			Yes
				0 -		0.4	□ No
				Son		24	Yes
							□ No
				-			☐ Yes ☐ No
							☐ Yes
3.	Do your expenses inclu	ıde ∎	No				— 103
	expenses of people oth yourself and your depe	er than	Yes				
Part :							
expe			uptcy filing date unless yo y is filed. If this is a supple				
Inclu	de expenses naid for w	ith non-cash	government assistance if	vou know the			
value			ed it on Schedule I: Your I			Your exp	enses
	The rental or home own		ses for your residence. In	clude first mortgage	4.	\$	450.00
	If not included in line 4	Ü	io.				
	4o Pool cotate torre				40	c	0.00
	4a. Real estate taxes4b. Property, homeow	ner's or renter	s insurance		4a. 4b.	\$	0.00
	4c. Home maintenant	•				\$	0.00
	4d. Homeowner's ass	•			4d.	\$	0.00
_			aur recidence, auch as hom		-	<u> </u>	0.00

ebtor 1	Grant, Tar	neeka L.	Case num	nber (if known)	
Utili	ties:				
6a.	Electricity, h	eat, natural gas	6a.	\$	350.00
6b.	Water, sewe	r, garbage collection	6b.	\$	0.00
6c.	Telephone.	cell phone, Internet, satellite, and cable services	6c.	\$	345.00
6d.	Other. Speci		6d.	·	0.00
	•	eeping supplies	7.	· 	
		ldren's education costs		\$	600.00
			8.		0.00
	_	, and dry cleaning	9.	·	50.00
	-	ducts and services	10.	\$	65.00
. Med	ical and denta	al expenses	11.	\$	0.00
	sportation. In not include car	clude gas, maintenance, bus or train fare. payments.	12.	\$	200.00
		ubs, recreation, newspapers, magazines, and books	13.	\$	0.00
		outions and religious donations	14.	· : ————	0.00
	rance.		17.	-	0.00
		rance deducted from your pay or included in lines 4 or	20		
	Life insuranc	, , ,	20. 15a.	\$	0.00
	Health insura		15b.	·	0.00
				·	
	Vehicle insu		15c.	·	97.00
	Other insura	· · · · · · · · · · · · · · · · · · ·	15d.	\$	0.00
Spe	cify:	ude taxes deducted from your pay or included in lines 4 o	[*] 20. 16.	\$	0.00
		se payments:			
		s for Vehicle 1	17a.	·	400.00
17b.	Car payment	s for Vehicle 2	17b.	\$	0.00
17c.	Other. Speci	fy:	17c.	\$	0.00
17d.	Other. Speci	fy:	17d.	\$	0.00
. You	r payments of	alimony, maintenance, and support that you did no	t report as		
		ur pay on line 5, Schedule I, Your Income (Official Fo		\$	0.00
. Oth	er payments y	ou make to support others who do not live with you	•	\$	0.00
Spe	cify:		19.		
. Oth	er real propert	y expenses not included in lines 4 or 5 of this form	or on Schedule I: You	ır Income .	
20a.	Mortgages o	n other property	20a.	\$	0.00
20b.	Real estate t	axes	20b.	\$	0.00
20c.	Property, hor	meowner's, or renter's insurance	20c.	·	0.00
20d.	. ,	e, repair, and upkeep expenses	20d.	·	0.00
		s association or condominium dues	20d. 20e.	·	
		s association of condominium dues		·	0.00
. Oth	er: Specify:		21.	+\$	0.00
. Calo	ulate your mo	onthly expenses			
	Add lines 4 th	• •		\$	2,557.00
		monthly expenses for Debtor 2), if any, from Official Fo	rm 106.I-2	\$	2,007.00
			IIII 1000-Z	l -	
		nd 22b. The result is your monthly expenses.			2,557.00
	•	onthly net income.	<u>.</u>	•	
		(your combined monthly income) from Schedule I.	23a.	· 	2,591.28
23b.	Copy your m	onthly expenses from line 22c above.	23b.	-\$	2,557.00
23c.		r monthly expenses from your monthly income.	222	\$	34.28
		your monthly net income.	23c.	\$	34.20
For e	xample, do you	increase or decrease in your expenses within the year expect to finish paying for your car loan within the year or do yours of your mortgage?			or decrease because of a
	lo.				
□Y	Г	Explain here:			

Fill in this i	nformation to identify yo	our case:			
Debtor 1	Tameeka L. Gran				
Dalatan	First Name	Middle Name	Last Name		}
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF OHIO, TOLEDO DIV	ISION	
Case number					
(if known)					☐ Check if this is an amended filing
Official For	m 106Dec				
Declara de la	tion About a	an Individua	I Debtor's So	chedules	12/15
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	rney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes.	Name of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
				Boolardiioi	i, and dignature (emolal Ferri Fre)
	alty of perjury, I declare to true and correct.	that I have read the sum	nmary and schedules filed	I with this declaratio	n and
that they ar	re true and correct.	that I have read the sum	nmary and schedules filed	l with this declaratio	n and
that they ar X /s/ Tar Tame		that I have read the sum	•		n and

	Fill in this	s information to identi	fy your case:				
Del	otor 1	Tameeka L. Gran	it				
		First Name	Middle Name	Last Name	}		
1 -	otor 2 ouse if, filing)	First Name	Middle Name	Last Name			
Uni	ted States Ban	kruptcy Court for the:	NORTHERN DISTRIC	T OF OHIO, TOLEDO DIVISION			
	se number					□ Chool	r if this is on
(II KI	lowiij					_	cif this is an ded filing
Su Be a info you	mmary of as complete an rmation. Fill or r original form	nd accurate as possiblut all of your schedule	e. If two married people es first; then complete the	and Certain Statistical Inform are filing together, both are equally response information on this form. If you are filing to the box at the top of this page.	sible for s	supplying	
ı aı	CT. Odillilla	ilize i oui Assets					
						Your a	ssets f what you own
1.	Schedule A/I	B: Property (Official Fo	orm 1064/B)				,
						\$	0.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B.			\$	23,830.45
	1c. Copy line	63, Total of all property	y on Schedule A/B			\$	23,830.45
Pai	t 2: Summa	rize Your Liabilities					
							abilities t you owe
2.			aims Secured by Property mn AAmount of claim, at th	v (Official Form 106D) he bottom of the last page of Part 1 of <i>Schedul</i> e	e D	\$	15,637.00
3.			<i>Unsecured Claims</i> (Officia 1 (priority unsecured clain	al Form 106E/F) ms) from line 6e 3 chedule E/F		\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured o	claims) from line 6j &chedule E/F		\$	69,626.03
				Your total	liabilities	\$	85,263.03
Pai	t 3: Summa	rize Your Income and	Expenses				
4.		our Income(Official Formula Mined monthly incom		<i>I</i>		\$	2,591.28
5.	Schedule J: `	Your Expenses (Official	Form 106J)				

Part 4: Answer These Questions for Administrative and Statistical Records

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.
 - ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,625.06

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$0.0	10
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.0	10
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.0	0
9d. Student loans. (Copy line 6f.)	\$0.0	0
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0
9g. Total. Add lines 9a through 9f.	\$0.00	

	Fill in this	s information to ident	ify your case:			
Debtor	1	Tameeka L. Gra	Middle Name	Last Name		
Debtor	2	riiotranio	Wilddo Hairio	Edot Hamo		
(Spouse it	if, filing)	First Name	Middle Name	Last Name		
United	States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF OHIO, TOLEDO DIVISIO	N .	
Case no					-	heck if this is an mended filing
State Be as co	ement omplete a	nd accurate as possil		e filing together, both are e	ankruptcy qually responsible for supply additional pages, write your n	
Part 1:	Give D	Details About Your Ma	rital Status and Where You	Lived Before		
1. Wh	nat is your	r current marital statu	s?			
■	Married Not mar	ried				
2. Du	ring the la	ast 3 years, have you	lived anywhere other than v	where you live now?		
□	No Yes. Lis	t all of the places you liv	ved in the last 3 years. Do not i	nclude where you live now.		
De	ebtor 1 Pri	ior Address:	Dates Debtor 1 there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
3. Wit states a	thin the la	est 8 years, did you ev es include Arizona, Cal	ver live with a spouse or legi ifornia, Idaho, Louisiana, Nev	al equivalent in a communi ada, New Mexico, Puerto Ri	ty property state or territory? co, Texas, Washington and Wis	(Community property sconsin.)
	No Yes. Ma	ke sure you fill out <i>Sch</i>	edule H: Your Codebtors (Offi	cial Form 106H).		
Part 2	Explai	n the Sources of You	r Income			
Fill	in the tota	al amount of income yo	nployment or from operating u received from all jobs and a nave income that you receive to	Il businesses, including part-		ar years?
	No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$4,010.85	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Gr	ant, Tame	eka L.		Case	e number (if known)	
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calen (January 1 to		31, 2019)	■ Wages, commissions, bonuses, tips	\$41,967.44	☐ Wages, commissionuses, tips	ions,
			☐ Operating a business		☐ Operating a busir	ness
For the calend January 1 to			■ Wages, commissions, bonuses, tips	\$38,783.50	☐ Wages, commissionuses, tips	ions,
			☐ Operating a business		☐ Operating a busir	ness
For the calend (January 1 to		1, 2017)	■ Wages, commissions, bonuses, tips	\$44,610.16	☐ Wages, commissionuses, tips	ions,
			☐ Operating a business		☐ Operating a busin	ness
			Debtor 1 Sources of income Describe below.	Gross income from each source	Debtor 2 Sources of income Describe below.	Gross income (before deductions
				(before deductions and exclusions)		and exclusions)
For the calend (January 1 to			In-home daycare	\$3,895.00		
	Debtor 1's Neither De	or Debtor 2 btor 1 nor [Made Before You Filed for E 's debts primarily consumer of the	debts? mer debts. Consumer debts a	are defined in 11 U.S.C.	§ 101(8) as "incurred by an
		90 days befo	ore you filed for bankruptcy, did	you pay any creditor a total of	\$6,825* or more?	
	□ _{No.}	Go to line	7.			
	□ _{Yes}	creditor. D	each creditor to whom you paid o not include payments for don o an attorney for this bankrupto	nestic support obligations, su		
.			t on 4/01/22 and every 3 years a		after the date of adjustm	ent.
■ Yes.			or both have primarily consulore you filed for bankruptcy, did		\$600 or more?	
	■ No.	Go to line	7.			
	□ _{Yes}		each creditor to whom you paid or domestic support obligations ptcy case.			
Creditor'	s Name and	Address	Dates of payme	nt Total amount	Amount you Wa	as this payment for

Statement of Financial Affairs for Individuals Filing for Bankruptcy

paid

still owe

Deb	btor 1 Grant, Tameeka L.		Case	e number (if known)		
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general part					
	which you are an officer, director, person in corbusiness you operate as a sole proprietor. 11 L	ntrol, or owner of 20% or mor	e of their voting secur	rities; and any mana	aging agent, in	cluding one for a
	No☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cosign.		nents or transfer an	y property on acc	ount of a deb	t that benefited an
	■ No□ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Par	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury and contract disputes.					
	□ No■ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
	Discover Bank v. Tameeka L. Grant 2019 CV 0287	Money on account	Erie County Co Common Pleas 323 Columbus Sandusky, OH	S Ave	☐ Pending ☐ On appe ☐ Conclude	al
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below ■ No. Go to line 11. ☐ Yes. Fill in the information below.		ty repossessed, for	reclosed, garnishe	∍d, attached, s	seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.		ıding a bank or fina	ncial institution, s	et off any am	ounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date a taken	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		ty in the possession	n of an assignee f	or the benefit	t of creditors, a

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Del	otor 1	Grant, Tameeka L.		Case number	(if known)	
Pai	rt 5:	List Certain Gifts and Contributions				
13.	Withi	n 2 years before you filed for bankru	ptcy, di	d you give any gifts with a total value of more th	nan \$600 per person?	
	_	No Yes. Fill in the details for each gift.				
	Gifts	s with a total value of more than \$600	per	Describe the gifts	Dates you gave the gifts	Value
	pers	on to Whom You Gave the Gift and			the girts	
		ress:				
14.	= 1	n 2 years before you filed for bankru No	ptcy, di	d you give any gifts or contributions with a tota	I value of more than \$	600 to any charity?
		Yes. Fill in the details for each gift or con				
	more Char	s or contributions to charities that to e than \$600 rity's Name ress (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value
Pal	rt 6:	List Certain Losses				
15.	or ga	n 1 year before you filed for bankrup mbling? No Yes. Fill in the details.	tcy or s	since you filed for bankruptcy, did you lose anyt	hing because of theft,	fire, other disaster,
		the loss occurred	Include	the amount that insurance has paid. List pending ce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	rt 7:	List Certain Payments or Transfers		, ,		
16.	Withi	n 1 year before you filed for bankrup ulted about seeking bankruptcy or pr	eparing	you or anyone else acting on your behalf pay og a bankruptcy petition? or credit counseling agencies for services required in		y to anyone you
	□ r	No				
		Yes. Fill in the details.				
	Addı Ema	on Who Was Paid ress ill or website address on Who Made the Payment, if Not Yo	u	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	330 San	Offices of Shelly L. Kennedy E Madison St dusky, OH 44870-3604 w.kennedydivorcelaw.com		Attorney Fees, credit counseling class, debtor education class, credit report	July, 2019	\$1,400.00
17.	prom		tors or	you or anyone else acting on your behalf pay o to make payments to your creditors? on line 16.	or transfer any propert	y to anyone who
	= 1	No				
		Yes. Fill in the details.				
	Pers Addı	on Who Was Paid ress		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
					-	

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	gifts and transfers that you have already listed or No Yes. Fill in the details.	n this statement.				
	Person Who Received Transfer Address	Description and property transfer		paym	ribe any property or ents received or debts in exchange	Date transfer was made
	Person's relationship to you			paiu	iii excilalige	
19.	beneficiary? (These are often called asset-prot		y property to a	self-settled	l trust or similar device	of which you are a
	■ No □ Yes. Fill in the details.					
	Name of trust	Description and	value of the pro	perty trans	ferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and Sto	rage Units		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc No Yes. Fill in the details.	r other financial accour	nts; certificates	of deposit;	, ,	, ,
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables? No Yes. Fill in the details.	ear before you filed for	bankruptcy, an	y safe dep	osit box or other depos	itory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit o	r place other than your	home within 1	year before	you filed for bankrupto	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, and ZIP Code)		Describe	the contents	Do you still have it?
Par	19: Identify Property You Hold or Control	for Someone Else				
23.	Do you hold or control any property that sor someone.	meone else owns? Inclu	ıde any propert	y you borro	owed from, are storing f	or, or hold in trust for
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value
Par	t 10: Give Details About Environmental Info	ormation				
For	the purpose of Part 10, the following definitio	ns apply:				
	Environmental law means any federal, state, toxic substances, wastes, or material into th controlling the cleanup of these substances.	e air, land, soil, surface				
	Site means any location, facility, or property	as defined under any e	environmental la	aw, whethe	r you now own, operate	, or utilize it or used to

Debtor 1 Grant, Tameeka L.

Official Form 107

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Case number (if known)

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb	tor 1	Grant, Tameeka L.		Case number (if known)	
	own	operate, or utilize it, including disposal	sites		
		• • • • • • • • • • • • • • • • • • • •	ronmental law defines as a hazardous w	aste, hazardous substance, toxic sub	stance, hazardous
	mate	rial, pollutant, contaminant, or similar t	erm.		
Rep	ort all	notices, releases, and proceedings that	t you know about, regardless of when th	ney occurred.	
24.	Has	any governmental unit notified you that	you may be liable or potentially liable u	nder or in violation of an environmen	tal law?
		No			
		Yes. Fill in the details.			
		ne of site	Governmental unit	Environmental law, if you	Date of notice
	Add	ress (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)	know it	
25.	Have	you notified any governmental unit of	any release of hazardous material?		
		No			
		Yes. Fill in the details.			
		ne of site	Governmental unit	Environmental law, if you	Date of notice
	Add	ress (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)	know it	
26.	Have	you been a party in any judicial or adn	ninistrative proceeding under any enviro	onmental law? Include settlements and	d orders.
		No			
	_	Yes. Fill in the details.			
		e Title	Court or agency	Nature of the case	Status of the
	Cas	e Number	Name Address (Number, Street, City, State		case
			and ZIP Code)		
		Give Details About Your Business or 0	•		
27.	With	in 4 years before you filed for bankrupt	cy, did you own a business or have any	of the following connections to any b	usiness?
		A sole proprietor or self-employed in	n a trade, profession, or other activity, ei	ther full-time or part-time	
		☐ A member of a limited liability comp	any (LLC) or limited liability partnership	(LLP)	
		☐ A partner in a partnership			
		☐ An officer, director, or managing exe	ecutive of a corporation		
		☐ An owner of at least 5% of the voting	or equity securities of a corporation		
		No. None of the above applies. Go to P	art 12.		
		Yes. Check all that apply above and fill	in the details below for each business.		
		iness Name Iress	Describe the nature of the business	Employer Identification number Do not include Social Security n	
	(Num	ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	
20	\A/:4L	in 2 years hafara yey filed for handrum	ny did yay aiya a finanaial atatamant ta		e ell financial
28.		tutions, creditors, or other parties.	cy, did you give a financial statement to	anyone about your business? include	e ali financiai
		No			
		Yes. Fill in the details below.			
	Nan		Date Issued		
		ITESS ber, Street, City, State and ZIP Code)			
Par	t 12:	Sign Below			

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Grant, Tameeka L.	Case number	(if known)
bankruptcy case can result in fines up to \$25 18 U.S.C. §§ 152, 1341, 1519, and 3571.	50,000, or imprisonment for up to 20 years, or both.	
/s/ Tameeka Grant		
Tameeka L. Grant	Signature of Debtor 2	
Signature of Debtor 1		
Date January 31, 2020	Date	
Did you attach additional pages to Your Stat	ement of Financial Affairs for Individuals Filing for Bankru	uptcy (Official Form 107)?
■ No		
☐ Yes		
Did you pay or agree to pay someone who is	not an attorney to help you fill out bankruptcy forms?	
■ No		
☐ Yes. Name of Person Attach the Ball	nkruptcy Petition Preparer's Notice, Declaration, and Signature	e (Official Form 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill ir	n this inforr	nation to identify your case:				directed in this form and	in Form	
Debt	or 1	Tameeka L. Grant		12	2A-1Supp:			
1	btor 2 ouse, if filing) 1. There is no presumption of abuse							
Unite	ed States E	Northern District o Bankruptcy Court for the: Division	f Ohio, Toledo		applies will be r	to determine if a presur made under <i>Chapter 7 N</i> icial Form 122A-2).	•	
Case number 3. The Means Test does not apply now becamilitary service but it could apply later.								
					☐ Check if this is a	an amended filing		
Off	icial F	orm 122A - 1				g		
		7 Statement of Your Cur	ront Mo	nthly Inc	ome		40/40	
GII	apiei	7 Statement of Tour Cur	TETIL IVIC	Titiny inc	Offic		12/19	
a sepa	arate sheet er (if knowi ry service, (and accurate as possible. If two married people a to this form. Include the line number to which the notes of the line number to which the notes of the line of th	e additional infession of a	ormation applies. buse because yo	On the top of any addi- u do not have primarily	tional pages, write your i consumer debts or beca	name and case use of qualifying	
1.	What is y	our marital and filing status? Check one onl	V.					
	_	arried. Fill out Column A, lines 2-11.	,					
		d and your spouse is filing with you. Fill ou	t both Column	s A and B lines:	2-11			
		d and your spouse is NOT filing with you.						
		ng in the same household and are not legal	•	•	ımns A and R lines 2	-11		
	☐ Livi pen	ng separately or are legally separated. Fill of alty of perjury that you and your spouse are legured for reasons that do not include evading the M	out Column A, ally separated	lines 2-11; do no under nonbankru	t fill out Column B. By ptcy law that applies o	checking this box, you		
10 6 i	1(10A). For months, add	erage monthly income that you received from all example, if you are filing on September 15, the 6-m the income for all 6 months and divide the total by 6 rental property, put the income from that property in	onth period wou	ld be March 1 throu lt. Do not include a	igh August 31. If the amony income amount more	ount of your monthly incom than once. For example, if	e varied during the	
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse		
2.	Your gros	ss wages, salary, tips, bonuses, overtime, a ductions).	nd commissi	ons (before all	\$3,625.06	\$		
3.	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.			\$	\$			
4.	of you or from an ur roommate	nts from any source which are regularly pai your dependents, including child support. married partner, members of your household, yes. Include regular contributions from a spouse clude payments you listed on line 3	Include regula	r contributions	n. \$0.00_	\$		
5.	Net incon	ne from operating a business, profession, o	r farm					
				ebtor 1				
	Gross rec	eipts (before all deductions)	\$ 0.00	_				
	,	and necessary operating expenses	-\$ 0.00	_		•		
		nly income from a business, profession, or farm	n \$	Copy here ->	\$ 0.00	\$		
6.	Net incon	ne from rental and other real property	_					
	_			ebtor 1				
		eipts (before all deductions)	\$ 0.00					
	•	and necessary operating expenses	-\$ 0.00	_	6 0.00	Φ		
1	Net month	nly income from rental or other real property	\$0.00	Copy here ->	\$ 0.00	\$		

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

0.00

page 1

7. Interest, dividends, and royalties

12b. The result is your annual income for this part of the form $% \left\{ 1,2,...,n\right\}$

12b. \$ 43,500.72

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live.

ОН

Fill in the number of people in your household.

3

Fill in the median family income for your state and size of household.

1. 13.

76,260.00

form. This list may also be available at the bankruptcy cleix office.

14. How do the lines compare?

14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 17, here is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2.

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this

14b. Line 12b is more than line 13. On the top of page 1, check box 2The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2.

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Tameeka Grant

Tameeka L. Grant

Signature of Debtor 1

Date **January 31, 2020**

Official Form 122A-1 Chapter 7 Statement of Your Current Monthly Income

Debtor 1 Grant, Tameeka L. Case number (if known)

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

United States Bankruptcy Court Northern District of Ohio, Toledo Division

compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$ 1,000.00 Prior to the filing of this statement I have received \$ 1,000.00 Balance Due \$ 0.00 2. The source of the compensation paid to me was: Debtor Other (specify): 3. The source of compensation to be paid to me is: Debtor Other (specify): 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed]	In re	Grant, Tameeka L.		Case No.					
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contention with the bankruptcy case is as follows: For legal services, I have agreed to accept \$ 1,000.00 Prior to the filing of this statement I have received \$ 1,000.00 Balance Due \$ 0.00 2. The source of the compensation paid to me was: Debtor Other (specify): 3. The source of compensation to be paid to me is: Debtor Other (specify): 1. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: CERTIFICATION 1. Certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. January 31, 2020 Date Algorithm Adagment of Attorney Law Offices of Shelly L. Kennedy Shelly & Kennedy Shelly & Kennedy Shelly & Kennedy Shelly & Kennedy Shelly			Debtor(s)	Chapter	7				
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Balance Due		For legal services, I have agreed to accept		\$	1,000.00				
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Sandusky, OH 44870-3604 (419) 626-6300 Fax: (419) 626-6333 shelly@kennedydivorcelaw.com	Da	ate	Signature of Attorney	,					
			Sandusky, OH 448 (419) 626-6300 Fa	ax: (419) 626-633	3				
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